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SALT LAKE AREA OFFICE
8180 SOUTH 700 EAST, SUITE 200
SANDY, UTAH 84070-0562
801.566.6633
801.566.0750 FAX
PATLAW@TNW.COM
WWW.TNW.COM

U.S. MAILING ADDRESS
P.O. Box 1219
SANDY, UTAH 84091-1219

LAS VEGAS AREA OFFICE
OF COUNSEL: NEIL J. BELLER
7408 WEST SAHARA
LAS VEGAS, NEVADA 89117
702.368.7767
† ADMITTED IN NEVADA

PATENT APPLICATION
Docket No. 22032 NP

VAUGHN W. NORTH
M. WAYNE WESTERN
GARRON M. HOBSON
PETER M. DE JONGE
CLIFTON W. THOMPSON
STEVE M. PERRY
WEILI CHENG, PH.D.
DAVID R. MCKINNEY, PE
GARY P. OAKESON
DAVID W. OSBORNE
DAVID L. STOTT
JASON R. JONES
PAUL C. OESTREICH, M.S.
ERIK S. ERICKSEN, M.S.
REGISTERED PATENT ATTORNEYS

NATHAN S. WINESETT
OF COUNSEL

BRYAN K. HANKS
PATENT AGENT

ALEX. HAYMOND, B.S. EE
TODD B. ALDER, PH.D.
JONATHAN M. BENNS, PH.D.
AARON M. SMITH, B.S. EE
WILLIAM T. RALSTON, PH.D. EE
TECHNICAL CONSULTANTS

CALVIN E. THORPE
(1938-1999)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith for filing is the patent application of Stevens for MEDICAL TABLE
EXTENSION AND METHOD comprising 16 pages of specification and claims.

☐ This application claims priority to U.S. application no. filed

Enclosed also are:

- ☒ 2 sheet(s) of drawings.
- ☐ Applicant claims small entity status under 37 CFR 1.9(b) & 1.27(c).
- ☒ An Assignment, with cover sheet, from the inventor to Morphographics, L.C.
- ☒ Declaration and Petition.
- ☒ Power of Attorney.
- ☐ A Preliminary Amendment is enclosed.

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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DATE OF DEPOSIT July 23, 2003

I hereby certify that this paper or fee (along with any paper or fee referred to as being attached or enclosed) is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 with sufficient postage on the date indicated above and is address to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Garron M. Hobson

- ☐ Nonpublication Request Under 35 USC 122(b)(2)(B)(i).
- ☒ A Certificate of Mailing by "Express Mail" certifying a filing date of July 23, 2003, by use of Express Mail Label No. EV329938684US.
- ☐ Information Disclosure Statement under 37 C.F.R. § 1.97, PTO Form-1449 with listed references attached (if indicated as being attached by the Information Disclosure Statement).

The filing fee has been calculated as shown below.

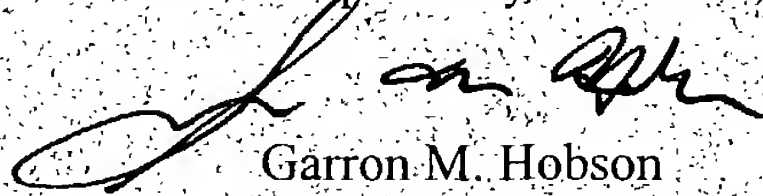
			SMALL ENTITY		OTHER THAN A SMALL ENTITY	
FOR	NO. FILED	EXTRA	RATE	FEE	RATE	FEE
BASIC FEE			\$375.00		\$750.00	\$750.00
TOT. CLAIMS	-20=	0	x \$9.00 =	\$ 171.00	x \$18.00 =	
IND. CLAIMS	-03=	0	x \$42.00 =	\$ 168.00	x \$84.00 =	
MULTIPLE DEPENDENT CLAIMS PRESENTED		0	\$140.00		\$280.00	
ASSIGNMENT FILING FEE			\$40.00		\$40.00	
Surcharge		\$65.00	TOTAL	\$ 819.00	TOTAL	

- ☐ A check in the amount of _____ is enclosed to cover the filing fee.

The Commissioner is hereby authorized to charge any additional fees associated with this communication or to credit any overpayment to Deposit Account No. 20-0100. Please address all future correspondence in connection with the above-identified patent application to the attention of the undersigned.

Dated this 23rd day of July, 2003.

Respectfully submitted,



Garron M. Hobson
Attorney for Applicant
Registration No. 41,073

THORPE NORTH & WESTERN, LLP
Customer No. 20,551
P.O. Box 1219
Sandy, Utah 84091-1219
Telephone: (801) 566-6633

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Enclosures
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